

## CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

(CFA-1)

State Form 4604 (R13/9-10) Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

## PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

							FILE NUMB	ER
1. IS THIS AN AMENDMENT	? 🔀 No	☐ Yes If Yes	s, please enter	the file num	ber in this bo	$x \rightarrow$		
							alv as nossible	
SECTION A. CANDIDAT		t Name	Middle Na	me	Nickname	accurat	3. Type of Committee	(Check one)
DUNAGIN		LANE		DLEY			Candidate's Principa	l Committee
4. Mailing Address				5. FAX (Optional	<u> </u>	6 F-mail	Address (Optional)	
		AK LA	.10	, .	,			4
12648 BEN	State	ZIP Code	8. County	( )	elephone (Day)	iane	dunagin@at	-C -V6[
LAWRENCE	IN		MARZO	<b>I</b>			(317) 440	
11. Party Affiliation		(6236	12.0	M (2	clude district numb	er if any M	lot required for an explorator	v committee )
☐ Democratic ☐ Libertarian 🖫 Re	publican 🗆	Other					AND DISTRI	
SECTION B. COMMITTE			in all applica	able boxes	as fully and	accura	telv as possible.	<u> </u>
13. Full Name of Committee (Do not	abbreviate)	Check if this is a	a new name					
COMMITTEE	To	ELEZ	— )_A	NE I	SUNAG	エん		
14. Mailing Address	is is a new ac	Idress		15. FAX (Option	al)	16. E-mail	Address (Optional)	
PO BOX	36	075				lane	dungain Bat	tinet 1
PO BOX		ZIP Code	18. County	19.	Telephone	<u>'                                    </u>	Uunaan (Pat 20. Committee Organizatio	n Date
LAURENCE	せん	46236	MARI	ON 13	17 ,694	יאררב י	- 80 - C (YY-DD-MM)	2015
21. Chairperson's Full Name	Designate Ca		. 1			<u> </u>		,
	-		NAGIL					j
LANE BQ/ 22. Mailing Address	is is a new ac	ddress	MICT	23. FAX (Option	al)	24. E-mai	Address (Optional)	
								H . +
25. City	State	ZIP Code	26. County	27.	Telephone (Day)	14/1	28. Telephone (Evening)	r-Co 11 CL
LAWRENCE	TW	46236	MAQZ			/ - <mark>277</mark> 1	(317) 440-	7267
29. Bank or Other Depositories (List				· · • 11	,			
FORUM			UNION	, doposito tarres,		ino ourory o	opour some or manname re	,
30. Exploratory Committee (Give brief				31. Salaries ar	d Reimbursemen	ts (Will the	committee pay the candidat	e a salary or
,	otatomoni onpia	g parpodo di ari dipioi	atory communication,				a copy of the contract.)	
SECTION C. APPOINTM	IENT OF	TREASURER	/IC 3-9-1-14\					
32. I, as Chairperson of					Signature	of the Con	nmittee Chairperson	
committee, appoint the follow	ing perso	n ae	NN DI	INIACT		ις,		ŀ
Treasurer of the Committee.  33. Treasurer's Full Name   Des	ionate candio	late as treasurer			N Com	<u>ve</u> 15 ,	- Jane	
							3	
SHAWN  34. Mailing Address ☐ Check if the		ddress	JU WA C	レイ 35. FAX (Option	al)	36 E-mail	Address (Optional)	
		_		35. FAX (Option	ai)	30. E-mai	Address (Optional)	
Po $Box$	36 C	ZIP Code	38. County	( )	Telephone (Day)	<u> </u>	40. Telephone (Evening)	
LAWRENCE		46236	MARZI	3	I lad	100		7 717
			1	11	1 10-11	7 11	(317)446-	1001
SECTION D. ACCEPTA 41. I give notice that I accept		APPOINTMEN			Signature of D	reor Acc	conting Appointment	
Committee. I am not the cha					Signature of Po	erson ACC	sepung Appointment	
permitted for a candidate comm	nittee unde	r IC 3-9-1-7).		- ( <b>5p. 40</b>				
SECTION E. CERTIFICA							FOR OFFICE USE	ONLY
We certify as the candidate						have	1 1 2000 Alba	
examined this statement. To th 42. Typed or Printed Name of C			Chairperson	correct and c	Date (MM-DD-)	${m}$	FILED	)
			Charperson	_	1_ '	´	1 I lee Lee Le	<b>'</b>
LANE B DU			B - Taphan	~	5-03-		EED 0 3 20	15
43. Typed or Printed Name of C		Signature of	Candidate		Date (MM-DD-)	(Y)	FEB <b>0 3</b> 20	IJ
LANE B DU	NACI	2   <u> </u>	~ B Bu	كهه	2-03-	15	^-	
Warning: State law requires that an							Myla a. Eld	ridge
who knowingly files a fraudulent report as required by the Indiana Carr							•	
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